## WAC 182-12-250

## Insurance Eligibility For Surviving Dependents of Emergency Service Personnel Killed In The Line of Duty.

Surviving dependents of emergency service personnel who were killed in the line of duty on or after January 1, 1998, are eligible to participate in health plan coverage administered by the HCA.

- (1) This section applies to the dependents of emergency service personnel "killed in the line of duty" as determined consistent with Title <u>51</u> RCW by the department of labor and industries.
- (2) "Emergency service personnel" means law enforcement officers, fire fighters and reserve officers, fire fighters as defined in RCW <u>41.26.030</u> and <u>41.24.010</u>.
  - (3) "Surviving dependent" means:
  - (a) A lawful spouse or ex-spouse as defined in RCW 41.26.162; and
- (b) Dependent children. The term "children" includes unmarried natural children, stepchildren and legally adopted children under the age of twenty or under the age of twenty-four for a dependent student attending high school or registered at an accredited secondary school, college, university, vocational school, or school of nursing. Disabled dependents as defined in RCW 41.26.030(7) are eligible at any age.
- (4) Premium rates will be subsidized consistent with rates established by PEBB for non-Medicare retirees under RCW <u>41.05.022</u> and for Medicare-entitled retirees under RCW <u>41.05.085</u>.
  - (5) Surviving dependents that are Medicare-entitled must enroll in both parts A and B of Medicare.
- (6) The surviving dependent must send a completed enrollment application to PEBB no later than sixty days after:
- (a) The last day of any coverage extended by the employing agency of the emergency service employee who died in the line of duty; or
- (b) The last day of coverage extended through the Consolidated Omnibus Budget Reconciliation Act (COBRA) from any employing agency.
- (7) Surviving dependents must choose one of the following two options for maintaining eligibility for participation under PEBB health plan coverage:
  - (a) Enroll in PEBB health plan coverage:
  - (i) Enrollment in the medical portion of PEBB health plan coverage is required.
- (ii) Enrollment in the dental portion of PEBB health plan coverage is optional. Once enrolled in dental coverage the person must maintain enrollment in dental coverage for a minimum of two years before dental coverage can be dropped.
  - (iii) Dental only coverage is not available.
  - (b) Defer enrollment:
- (i) Surviving dependents may defer enrollment in PEBB health plan coverage if they are enrolled in employer sponsored medical through their employment.
- (ii) Surviving dependents may enroll in PEBB health plan coverage when their employer sponsored coverage ends. Proof of continuous enrollment in other comprehensive employer sponsored coverage must be submitted with the application for enrollment to the HCA within sixty days after the date that their coverage ended.
  - (8) Enrollees may change their health carrier selection during open enrollment. In addition to open

enrollment, enrollees may change health carriers if they move out of their health carrier's service area or into a service area where a health carrier that was not previously offered is now available.

- (9) Surviving dependents will forfeit their right to enroll in PEBB health plan coverage if they:
- (a) Do not make application to PEBB before the date specified in subsection (6) of this section; or
- (b) Do not maintain continuous comprehensive employer sponsored medical coverage during the deferral period, as provided in subsection (7)(b)(i) of this section.

[Statutory Authority: RCW  $\underline{41.05.160}$  and  $\underline{41.05.165}$ . 04-18-039, § 182-12-250, filed 8/26/04, effective 1/1/05.]